

California Conservation Corps-California Energy Service Corps



AmeriCorps Member Application

Name:(Last / First / Middle Initial)	Social Security Number:	
Birth Date: (Month / Date / Year)	Birth Place:	
(Month / Date / Tear)		
Gender: (Circle One) Male Female	Email:	
Current Address:	Permanent / Parent / Guardian Address: (Circle One)	
(Street, Include Apt. #)	(Street, Include Apt. #)	
City State Zip	City State	Zip
Current Phone: Daytime: () Cell: ()	Emergency Contact:() Emergency Phone: () Relationship:	
Do you have a valid driver's license? Yes No Driver's license / I.D. number:State How did you learn about the CCC?	Registration Number? Education:	
Corpsmember ☐ Name: Teacher/Counselor ☐ Billboard ☐ Family ☐ Internet Website ☐ Poster/Flyer ☐ TV ☐ Radio ☐ Movies ☐ Post Card ☐ Brochure ☐ Friend ☐ Newspaper ☐ Job Fair/Event ☐ Bus ☐ Phone Book ☐ Other ☐ Explain:	What is the highest grade completed? 9 □ 10 □ 11 □ 12 □ GED □ 1 to 3 Years College □ College □ Degree Last School Attended	
Corpsmember ☐ Name: Teacher/Counselor ☐ Billboard ☐ Family ☐ Internet Website ☐ Poster/Flyer ☐ TV ☐ Radio ☐ Movies ☐ Post Card ☐ Brochure ☐ Friend ☐ Newspaper ☐ Job Fair/Event ☐ Bus ☐ Phone Book ☐ Other ☐ Explain:	9	
Corpsmember ☐ Name: Teacher/Counselor ☐ Billboard ☐ Family ☐ Internet Website ☐ Poster/Flyer ☐ TV ☐ Radio ☐ Movies ☐ Post Card ☐ Brochure ☐ Friend ☐ Newspaper ☐ Job Fair/Event ☐ Bus ☐ Phone Book ☐ Other ☐ Explain: Have you ever worked for the CCC? Yes ☐ No ☐ Have you ever applied for employment with the CC Have you served in a National Service Program (in	9	
Corpsmember ☐ Name: Teacher/Counselor ☐ Billboard ☐ Family ☐ Internet Website ☐ Poster/Flyer ☐ TV ☐ Radio ☐ Movies ☐ Post Card ☐ Brochure ☐ Friend ☐ Newspaper ☐ Job Fair/Event ☐ Bus ☐	9)
Corpsmember Name:	9	ms of

El		
Employment Record:		
	nt, home management, military service, full o	r part time employment. Start with
your current or most recent work ex	kperience.	
From (mo/yr)/ To:/	Employer:	
City/State: Phone No: () -	Supervisor: Job Title:	Hours per Week:
Your Duties and Responsibilities:	Job Title.	
Reason For Leaving:		
From (mo/yr)/ To:/	Employer:	
City/State:	Supervisor:	Hours per Week:
Phone No: () - Your Duties and Responsibilities:	Job Title:	
four Duties and Responsibilities:		
Reason For Leaving:		
From (mo/yr)/ To:/	Employer:	
City/State:	Supervisor:	Hours per Week:
Phone No: () -	Job Title:	
Your Duties and Responsibilities:		
Reason For Leaving:		
	t background checks, drug testing and	
	ent hiring conditions for all applicants hese pre-employment hiring conditior	
employed with the CCC.		g
Have you ever been convicted of	•	
•		
Please indicate the crime:		
Have you ever been convicted of intent to sell or felony possession	f drug cultivation, manufacturing, distribu	tion, trafficking, possession with
Please indicate the crime:		
Are You Currently on Probation	or Parole? Yes □ No □	
•		
Please indicate the crime and the	e terms and conditions of your parole or p	probation:

References:

Reference One

Please provide contact information for two references. References may be from supervisors, teachers, mentors, clergy, community leaders, etc. Choose people who have known you for at least one year and will speak from experience to provide specific information about your potential, maturity, commitment, and responsibility.

Name:	Organization:		
Position:	Relationship to Applicant:		
Best time to contact:			
Address:	City:	State:	Zip:
Phone: ()	Email:		
Reference Two			
Name:	Organization:		
Position:	Relationship to Applicant: _		
Best time to contact:			
Address:	City:	State:	Zip:
Phone: ()	Email:		
	DECLARATION		
	s made in this application are true and corsion may result in termination of employme		
Signature of Applicant:	Date:		